

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

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**SUPPLEMENTAL
DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
with Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 199/1

First Named Inventor Kushwaha

COMPLETE IF KNOWN

Application Number 10 / 670,441

Filing Date 09/25/2003

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DISPLACEMENT AND FORCE SENSOR

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

09/25/2003

as United States Application Number or PCT International

Application Number 10/670,441 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


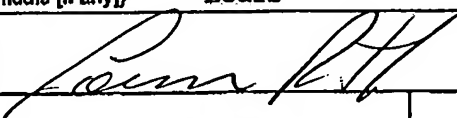
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

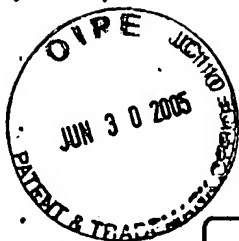
[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		36829		OR <input type="checkbox"/> Correspondence address below	
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small>					
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
R. Lal			Kushwaha		
Inventor's Signature					Date
					March 5/04
Residence: City		State	Country	Citizenship	
Saskatoon		SK	Canada	Canadian	
Mailing Address					
116 Kenosee Crescent					
City		State	ZIP	Country	
Saskatoon		SK	S7J 3S8	Canada	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Louis			Roth		
Inventor's Signature					Date
					March 5/04
Residence: City		State	Country	Citizenship	
Saskatoon		SK	Canada	Canadian	
Mailing Address					
222 Hurley Terrace					
City		State	ZIP	Country	
Saskatoon		SK	S7N 4H8	Canada	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet	Page _____ of _____
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))		Family Name or Surname							
James		Schneider							
Inventor's Signature <i>James Schneider</i>		Date <i>March 5th 2004</i>							
Residence: City	Barthel	State	SK	Country	Canada	Citizenship	Canadian		
Mailing Address									
Box 10									
Mailing Address									
City		Barthel		State	SK	Zip	S0M 0C0	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))		Family Name or Surname							
Tyrel		Lloyd							
Inventor's Signature <i>Tyrel Lloyd</i>		Date <i>MARCH 8, 2004</i>							
Residence: City	Unity	State	SK	Country	Canada	Citizenship	CDN		
Mailing Address									
Box 896									
Mailing Address									
City		Unity		State	SK	Zip	S0K 4L0	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))		Family Name or Surname							
William C.		Roberts							
Inventor's Signature		Date							
Residence: City	Medicine Hat	State	AB	Country	Canada	Citizenship	CDN		
Mailing Address									
109 - 128A 1st Street N.E.									
Mailing Address									
City		Medicine Hat		State	AB	Zip	T1A 5K4	Country	Canada

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

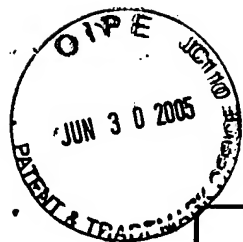


DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page _____ of _____
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
James		Schnaider					
Inventor's Signature		Date					
Residence: City	Barthel	State	SK	Country	Canada	Citizenship	Canadian
Mailing Address							
Box 10							
Mailing Address							
City	Barthel	State	SK	Zip	SOM 0C0	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
Tyrel		Lloyd					
Inventor's Signature		Date					
Residence: City	Unity	State	SK	Country	Canada	Citizenship	CDN
Mailing Address							
Box 896							
Mailing Address							
City	Unity	State	SK	Zip	SOK 4L0	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))		Family Name or Surname					
William C.		Roberts					
Inventor's Signature		Date					
Wdhic		8 March 2004					
Residence: City	Medicine Hat	State	AB	Country	Canada	Citizenship	CDN
Mailing Address							
109 - 128A 1st Street N.E.							
Mailing Address							
City	Medicine Hat	State	AB	Zip	T1A 5K4	Country	Canada

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**DECLARATION****ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page _____ of _____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Wayne		Morley	
Inventor's Signature <i>Wayne Morley</i>		Date <i>March 5, 2004</i>	
Residence: City	Saskatoon	State	SK
Country	Canada	Citizenship	Canadian
Mailing Address <i>409 113th Street</i>			
Mailing Address			
City	Saskatoon	State	SK
Zip	S7N 1W2	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Denise		Stilling	
Inventor's Signature <i>Denise S.D. Stilling</i>		Date <i>March 5, 2004</i>	
Residence: City	Saskatoon	State	SK
Country	Canada	Citizenship	CDN
Mailing Address <i>227 Vincent Court</i>			
Mailing Address			
City	Saskatoon	State	SK
Zip	S7N 4G9	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
Zip		Country	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.83. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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